

P22000042646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

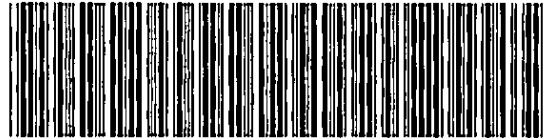
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

T. SCOTT

JUN - 2 2022



800387041618

05/04/22--01027--002 **75.75

22
JUN 16 2022
JUN 16 2022

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Faith Shield Realty Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Carlos Giraldo

Name (Printed or typed)

3064 S Military Trail Suite 5

Address

Lakeworth FL 33463

City, State & Zip

561-797-8578

Daytime Telephone number

carlos@faithshieldrealty.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Faith Shield Realty Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3064 S Military Trail Suite 5
Lakeworth, FL 33463

Mailing address, if different is:

PO Box 742002
Bovnton Beach, FL 33474-2002

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To transact any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Giraldo (P/S) Name and Title: _____

Address 3064 S Military Trail Suite 5 Address: _____

Lakeworth FL 33463 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Carlos Giraldo

Address: 3064 S Military Trail Suite 5
Lakeworth FL 33463

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Carlos Giraldo

Address: 3064 S Military Trail Suite 5
Lakeworth FL 33463

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

C - H - G - I - R - A - L - D - O

Required Signature/Registered Agent

01/12/22

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

C - H - G - I - R - A - L - D - O

Required Signature/Incorporator

01/12/22

Date